



# UNITED STATES MARINE CORPS

3D MARINE DIVISION (-) (REIN)

UNIT 35801

FPO AP 96602-5801

DivO 6400.1

SURG

7 May 97

## DIVISION ORDER 6400.1

From: Commanding General

To: Distribution List

Subj: CERTIFICATION, TRAINING, AND USE OF INDEPENDENT DUTY  
HOSPITAL CORPSMEN (IDC)

Ref: (a) OPNAVINST 6400.1A

(b) Division Surgeon Requirement Letter #11

Encl: (1) Sample - Request for Recertification

(2) Sample - Medical Records Review

(3) Sample - Physician Supervisor Quarterly Report

(4) Sample - Assignment as Primary IDC Physician  
Supervisor

(5) Sample - Assignment of Alternate IDC Physician  
Supervisor

(6) Sample - Assignment of IDC Physician Supervisor

1. Purpose. The purpose of this program is to ensure appropriate supervision and training of all Division IDCs, and the documentation of such supervision and training per reference (a).

2. Background. The IDC Training Program is part of the Quality Assurance & Quality Improvement (QA/QI) Program. IDCs have been trained to provide health care independent of direct physician supervision. The appropriateness and quality of this care along with continuous training must be supervised and documented by a physician.

### 3 Definitions

a. Independent Duty Hospital Corpsmen. IDCs are hospital corpsmen in grades Petty Officer 2nd Class and above, who have successfully completed an advanced Hospital Corps "C" School, or sanctioned equivalent training listed in the Catalog of Navy Training Courses which, upon completion, results in identification with an IDC Navy Enlisted Classification code. They are initially

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certified and continuously recertified by virtue of their training to perform clinical duties independent of a medical officer. They may be assigned to fixed military treatment facilities, units of the operating forces, or isolated and geographically remote duty stations where no medical officer is assigned.

b. Certification and Recertification. This is accomplished by ongoing training that verifies that the IDC possesses the requisite clinical skill and knowledge to perform specific medical and dental care. Certification occurs upon completion of an approved course of instruction. Recertification for specific skills can occur at any time but usually occurs shortly after an IDC has reported to a new command or prior to leaving on permanent change of station (PCS) or temporary additional duty (TAD) orders.

c. Supervision. Supervision is the process of reviewing, observing, and accepting responsibility for the assigned IDC's clinical performance.

(1) Indirect. Indirect supervision is accomplished by retrospective review of medical records. This includes evaluation of appropriateness of consultation and referral, adequacy of the history and physical examination, appropriateness of diagnostic and therapeutic procedures, drug utilization and minor surgical procedures. Review of care also assess the IDC's judgment in restricting his or her independent practice to the authorized scope of practice. A random sample of at least 20% of the total medical records generated by the IDC monthly must be reviewed by the IDC's physician supervisor.

(2) Direct. The supervisor is involved in the clinical decision-making process. This includes:

(a) Verbal Contact. The supervisor is contacted by phone, radio, or message by the IDC before implementing or changing a regimen of care, except in cases of emergencies, where the IDC can contact the supervisor after initiation or completion of care.

(b) Physical Presence. The supervisor is present through all or a portion of care. Direct supervision will be reflected by the physician's cosignature of the patient's medical record.

d. Training Record A file is maintained on each IDC by the IDC Coordinator.

#### 4 Training

a. Continuing Medical Education Programs. Each IDC is required to participate in continuing medical education as a part of the recertification process. A minimum of 12 IDC continuing education credits is required annually unless deployed or detrimental to the unit's mission. The physician supervisor or program director may also direct that the IDC complete specific continuing education courses to correct identified clinical deficiencies.

b. Contingency Training. IDCs will comply with the existing broad base contingency training, primarily Basic Cardiac Life Support and Advanced Cardiac Life Support.

5. Duties. Duties relate to the care and management of patients on an individual basis. These duties must be consistent with a composite set of acquired skills and knowledge which defines the IDC's scope of practice. In addition, IDC's are authorized to prescribe medications in the performance of their clinical duties and will be guided by reference (b).

#### Responsibilities

a. Program Director. The Division Surgeon is the Program Director and is responsible for establishing the program, providing oversight of the program, reviewing all IDC's reports, and appointing IDC physician supervisors.

b. Program Manager. The Program Manager is appointed by the Division Surgeon, and is responsible for the implementation, management, and monitoring of the program. The Program Manager will be an officer or senior enlisted member with significant experience with the IDC Program. A copy of the appointment letter will be placed in the Program Manager's service record.

c. IDC Physician Supervisor. The IDC Physician Supervisor is a medical officer appointed by the Division Surgeon, and is responsible for supervising, evaluating, training, and documenting training of appointed IDC's.

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d. IDC Coordinator. The IDC Coordinator is appointed by the Division Surgeon, and is responsible for maintaining IDC folders and orienting the IDCs to the program.

7 Action

a. Physician review of care provided by the IDC

(1) The initial assessment period is not a set period; rather, it encompasses the review of at least 50 health records generated by the IDC. If possible, the IDC will be assigned to work with his/her physician supervisor. Otherwise, another available privileged Medical Officer (MO) may review the required health records. During the initial assessment period, the physician supervisor or another privileged MO must countersign all health record entries of the IDC before the departure of the patient. After at least 50 records have been reviewed and considered satisfactory, the physician supervisor may submit a request of recertification to the Division Surgeon using enclosure (1).

2) The supervising physician at a minimum must:

(a) Meet frequently with the IDC to discuss clinical strengths and opportunities to improve care.

(b) Perform at least monthly documented random medical record reviews of a minimum of 20% of records generated by the IDC in order to assess the IDC's clinical performance using enclosure (2). At a minimum, the review must address the adequacy of diagnostic technique and procedures, therapeutic practices, and patient treatment documentation.

(c) Submit quarterly written reports, summarizing the IDC's clinical performance to the IDC Program Director via the Program Manager for inclusion in the IDC's training record using enclosure (3). A copy of this report is included as an enclosure to the monthly QA/QI report for trending purposes.

(3) The supervising physician must assess the clinical skills of IDC's under PCS or TAD orders to Division units and certify clinical competence by a page 13 entry. This entry will be made upon completion of a physician supervised recertification program, and upon approval by the Division Surgeon authorizing the IDC to perform his

duties independent of a medical officer. The page 13 entry from the supervising physician to the Officer In Charge, Personnel Support Detachment, Okinawa via the Division Surgeon will be accomplished utilizing enclosure (1).

b. All incoming IDCs will report to the IDC Coordinator for orientation and review of the IDC Training Record. IDCs of 3d Marines, Kaneohe Bay, Hawaii will report to the Regimental Surgeon, 3d Marines.

c. The Division Surgeon will assign a primary and an alternate physician supervisor for each IDC (enclosures (4) and (5)). The IDC will be provided a letter designating the primary and the alternate physician supervisor assigned (enclosure (6)). A copy of this record will be placed in the IDC's service record. No more than three IDCs will be under the direct supervision of a single physician supervisor.


d. Each IDC primary and alternate physician supervisor will provide supervision as directed by reference (a).

e. Documentation of all IDC evaluation training, and monitoring is due to the Division Surgeon's Office as directed in section 8, Summary of IDC Physician Supervision Periodic Report.

f. Upon transfer, the IDC will receive a completed Training Record for continuity to deliver to the receiving command.

8 Summary of IDC Physician Supervision Periodic Report

<u>Periodicity</u>	<u>Report</u>	<u>Form</u>	<u>Due</u>
Monthly	Records Review	Enclosure (2)	5th working day following month
Quarterly	Physician Supervisor Quarterly Report	Enclosure (3)	1 Jan 1 Apr 1 Jul 1 Oct

  
R. B. INGRAM  
Chief of Staff

DISTRIBUTION: A/D

Sample of Recertification Letter  
Command Letter Head

SSIC  
Orig Code  
Date

From: (Name of Physician Supervisor)  
To: OIC, Personnel Support Detachment, Okinawa  
Via: Division Surgeon, 3d Marine Division  
  
Subj: RECERTIFICATION OF INDEPENDENT DUTY CORPSMAN ICO (Name of  
IDC)  
  
Ref: (a) DivO 6400.1

1. I have personally supervised (Name of IDC) from \_\_\_\_ to \_\_\_\_\_. I find him competent and possessing the requisite clinical skills and knowledge to perform primary patient care equivalent with his training and independent of a medical officer, as outlined in reference (a).

2. Request the following page 13 entry be made in the member's service record per reference (a):

"Recertified to perform clinical duties independent of a medical officer."

Signature

-----  
Orig Code  
Date

FIRST ENDORSEMENT

From: Division Surgeon  
To: OIC, Personnel Support Detachment, Okinawa

1. Forwarded, approved.

Signature

Copy to:  
File  
(Name of IDC)

ENCLOSURE (1)

MONTHLY RECORDS REVIEW  
FOR INDEPENDENT DUTY CORPSMAN

MONTH OF: \_\_\_\_\_

NAME OF IDC REVIEWED: \_\_\_\_\_

CASES: (Minimum of 20% of IDC cases selected randomly by reviewer)

	INITIALS/ LAST 4 SSN	DIAGNOSIS	COMMENTS
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

\_\_\_\_\_  
Signature (Physician Supervisor)

ENCLOSURE (2)

IDC PHYSICIAN SUPERVISOR  
QUARTERLY REPORT

Date:

From: (Name of Physician Supervisor)  
To: Division Surgeon, 3d Marine Division  
Subj: IDC PHYSICIAN SUPERVISOR; QUARTERLY REPORT ENDING  
Ref: (a) DivO 6400.1

1. In compliance with reference (a), the following report is submitted.

2. On the basis of supervision and health records review, I rate  
\_\_\_\_\_ clinical and diagnostic skills to be:

SATISFACTORY \_\_\_\_\_

NEEDS IMPROVEMENT \_\_\_\_\_

UNSATISFACTORY \_\_\_\_\_

3. Review of training file made The following deficiency(ies) are noted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4 COMMENTS/RECOMMENDATIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician's Signature

ENCLOSURE (3)



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HEADING

SSIC  
Orig Code  
Date

From: Division Surgeon  
To: (Name of Medical Officer)

Subj: ASSIGNMENT AS PRIMARY IDC PHYSICIAN SUPERVISOR

Ref: (a) DivO 6400.1

1. Per reference (a), you have been assigned as the IDC physician supervisor for (name of IDC).
2. You will be guided in the performance of this duty by reference (a) and other applicable directives.
3. Specifically, you will perform and document by signature evaluations or reviews of the treatment rendered by (name of IDC). At a minimum, this review will consist of a written report evaluating the adequacy of diagnostic techniques and procedures, therapeutic practices, and patient treatment documentation based on a specific review of patient records. At least 20% of the IDC's medical records per month will be reviewed. A copy of these documented reviews will be forwarded to 3d Marine Division QA/QI Committee for review and retention.
4. This appointment shall remain in effect until you or (Name of IDC) transfers from this command or the appointment is terminated in writing by the Division Surgeon.

Signature

Copy to:  
Service Record  
Program Manager  
IDC Training File  
File

ENCLOSURE (4)

HEADING

SSIC  
Orig Code  
Date

From: Division Surgeon  
To: (Name of Medical Officer)

Subj: ASSIGNMENT OF ALTERNATE IDC PHYSICIAN SUPERVISOR

Ref: (a) DivO 6400.1

1. Per reference (a), you have been assigned as the alternate IDC physician supervisor for (name of IDC). Performance of this duty becomes effective when the primary supervisor is unavailable.
2. You will be guided in the performance of this duty by reference (a) and other applicable directives.
3. Specifically, you will perform and document by signature evaluations or reviews of the treatment rendered by (name of IDC). At a minimum, this review will consist of a written report evaluating the adequacy of diagnostic techniques and procedures, therapeutic practices, and patient treatment documentation based on a specific review of patient records. At least 20% of the IDC's medical records per month will be reviewed. A copy of these documented reviews will be forwarded to 3d Marine Division QA/QI Committee for review and retention.
4. This appointment shall remain in effect until you or (Name of IDC) transfers from this command or the appointment is terminated in writing by the Division Surgeon.

Signature

Copy to:  
(Name of IDC)  
Service Record  
Program Manager  
IDC Training File  
File

ENCLOSURE (5)